STATEMENT OF

| FORM 1 | ORGANIZATION (See instructions) | |
|---|---|--|
| NAME OF COMMITTEE (in the community of the community | (Check if name Example: If typying, ty | Office use only 12FE4M5 |
| Citigroup Inc. | Political Action Committee - Federal/State (Citigroup State) | |
| ADDRESS (number and s | 1101 Pennsylvania Ave. NW #1000 | |
| (Check if address is changed) | Washington | DC 20004 _ |
| | CITY | STATE▲ ZIP CODE ▲ |
| COMMITTEE'S E-MAI (Check if address is changed) | L ADDRESS (Please provide only one e-mail address) pac@citi.com L L L L L L L L L L | |
| COMMITTEE'S WEB | PAGE ADDRESS (URL) | |
| (Check if address is changed) | n/a | |
| 2. DATE M M M M | / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | |
| 3. FEC IDENTIFICA | TION NUMBER C C00039305 | |
| 4. IS THIS STATEM | ENT NEW (N) OR X AMENDED | (A) |
| I certify that I have exami | ned this Statement and to the best of my knowledge and belief it is true, co | rrect and complete |
| Type or Print Name of | Treasurer Theresa A Russell | |
| Signature of Treasurer | Electronically Filed by Theresa A Russell | _ Date 11 1 / 22 / Y Y Y Y Y |
| NOTE: Submission of fal | se, erroneous, or incomplete information may subject the person signing the | |
| Office Use Only | For further inform Federal Election C Toll Free 800-424-1 | ommission FEC FORM 1 9530 (Revised 02/2009) |

| | F | FEC F | Form 1 (Revised 02/2009) | Page 2 |
|----|-----------------|-------------------|---|---|
| 5. | | | OMMITTEE (Check One) Committee: | |
| | (a) | | This committee is a principal campaign committee. (Complete the candidate information below.) | |
| | (b) | | This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.) | ne candidate |
| | Name Candi | | | |
| | Candid Party | date Affiliati | on Office House Senate President | State District |
| | (c) | | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| | Name Candi | | | |
| | Party | Comm | | |
| | (d) | | This committee is a (National, State (or subordinate) committee of the | (Democratic, Republican,etc.) Party. |
| | Politic | cal Act | tion Committee (PAC): | |
| | (e) | X | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connecte | d organization is a: |
| | | | X Corporation Corporation w/o Capital Stock Lal | bor Organization |
| | | | Membership Organization Trade Association Co | poperative |
| | | | In addition, this committee is a Lobbyist/Registrant PAC. | |
| | (f) | | This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee) | d fund or party |
| | | | In addition, this committee is a Lobbyist/Registrant PAC. | |
| | | | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) | |
| _ | laint E | | | |
| | | -unara | ising Representative: | |
| | (g) | Ш | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate. | more political |
| | (h) | | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate. | r more political |
| | | Com | mittees Participating in Joint Fundraiser | |
| | | | 1. FEC ID number | |
| | | | 2. FEC ID number | |
| | | | 3. FEC ID number | |
| | | | . FEC ID number C | |

| | FEC Form 1 (Revised 02 | /2009) | | Page 3 |
|----|---|--|---|---------------------------|
| W | rite or Type Committee Name | | Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor New York CITY STATE ZIP CODE Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor ame, address, (phone number optional), and position of the person in direcords. | |
| | Citigroup Inc. Political A | Action Committee - Federal/State (| | |
| 6. | Name of Any Connected Org | anization, Affiliated Committee, Joint F | undraising Representative, | or Leadership PAC Sponsor |
| | Citigroup Inc. | | | |
| | | <u> </u> | <u> </u> | |
| | Mailing Address | 399 Park Avenue | | |
| | | | | |
| | | New York | <u> </u> | 10043 |
| | | CITY▲ | STATE | ▲ ZIP CODE ▲ |
| | Relationship: | | | |
| | X Connected Organization | Affiliated Committee | Joint Fundraising Representati | ve Leadership PAC Sponsor |
| 7. | Custodian of Records: Ide possession of Committee | | ber optional), and positi | on of the person in |
| | Full Name Theresa | A Russell | 1 1 1 1 1 1 1 1 1 1 | |
| | Mailing Address | c/o PASS | | |
| | | 1020 N. Fairfax Street | t . | |
| | | Alexandria | | 22314 |
| | Title or Position ▼ | CITY A | STATE | ZIP CODE A |
| | Custodian | | Telephone number _ | 718 - 248 - 1554 |
| 8. | name and address of any Full Name | and address (phone number option designated agent (e.g., assistant tre | | committee; and the |
| | Mailing Address | One Court Square 31 | st Floor | |
| | | Long Island City | | 11120 |
| | Title or Position ♥ | CITY A | STATE | ZIP CODE A |
| | Treasurer | | Telephone number | 718 _ 248 _ 1554 |
| | | | • | |

| FEC Form 1 (Revis | ed 02/2009) | | Page 4 |
|--|--|------------------------------|----------------------|
| Full Name of Designated Agent | Lisa M Burleigh | | |
| Mailing Address | One Court Square 31st Floor | | |
| | Long Island City | NY | 11120 – |
| Title or Position ▼ | CITY A | STATE A | ZIP CODE A |
| Assista | ant Treasurer Tele | phone number 718 | 248 1547 |
| | | | |
| Banks or Other Denosit | ories: List all hanks or other depositories in which the | ommittee deposits funds by | olds accounts rents |
| safety deposit boxes or m Name of Bank, Depository | aintains funds. | committee deposits funds, h | olds accounts, rents |
| safety deposit boxes or m. Name of Bank, Depository Cit | aintains funds. y, etc. t ibank, N.A. | committee deposits funds, he | olds accounts, rents |
| safety deposit boxes or m. Name of Bank, Depository Cit | aintains funds. y, etc. tibank, N.A. 1 Penns Way | | |
| safety deposit boxes or m. Name of Bank, Depository Cit | aintains funds. y, etc. tibank, N.A. 1 Penns Way New Castle CITY △ | DE | 19720 _ |
| safety deposit boxes or m. Name of Bank, Depository Cit Mailing Address | aintains funds. y, etc. tibank, N.A. 1 Penns Way New Castle CITY △ | DE | 19720 _ |
| safety deposit boxes or m Name of Bank, Depository Cit Mailing Address | aintains funds. y, etc. tibank, N.A. 1 Penns Way New Castle CITY △ | DE | 19720 _ |
| safety deposit boxes or m. Name of Bank, Depository Cit Mailing Address Name of Bank, Depository | aintains funds. y, etc. tibank, N.A. 1 Penns Way New Castle CITY △ | DE | 19720 _ |
| safety deposit boxes or m. Name of Bank, Depository Cit Mailing Address Name of Bank, Depository | aintains funds. y, etc. tibank, N.A. 1 Penns Way New Castle CITY △ | DE | 19720 _ |

A. Form/Schedule : **F1A**Transaction ID :

This amendment is being filed to disclose a new address and phone number for the PAC Treasurer (Theresa Russell) and Asst. Treasurer (Lisa Burleigh). Please update your records accordingly.

| Banks or Other Depositorie safety deposit boxes or mainta | | mmittee deposits funds, hold | s accounts, rents |
|--|--|------------------------------|----------------------------|
| Name of Bank, Depository, et | | [| ADDITIONAL] |
| Liti | | | |
| Mark an Addison | | | |
| Mailing Address | | | |
| | | | |
| | | | |
| | CITY 🛕 | STATE.▲ | ZIP CODE 🛕 |
| Name of Any Connected O | rganization, Affiliated Committee, Joint Fundraising | Representative, or Leaders | [ADDITIONAL] |
| Citigroup Inc. PAC - Fe | | | , |
| | | | |
| | 1101 Pennsylvania Avenue NW #1000 | | |
| Mailing Address | | | |
| | · · · · · · · · · · · · · · · · · · · | | |
| | Washington | | 20004 |
| elationship: | CITY▲ | STATE 🛕 | ZIP CODE |
| Connected Organization | X Affiliated Committee Joint Fundraising | Representative Lead | ership PAC Sponsor |
| Designated Agent | | | [ADDITIONAL] |
| = = | ald Stephens | | |
| | 11440 Carmel Commons Blvd. | | |
| Mailing Address | 1440 Carmer Commons Bivu. | | |
| | Charlotte | NC_ | 28226 _ |
| | | | |
| Title or Position ▼ | CITY & | STATE▲ | ZIP CODE A |
| | nt Treasurer | 704 | ZIP CODE A 544 3512 |
| | nt Treasurer | | 544 3512 |
| | nt Treasurer Tel | 704 | |

| Banks or Other Depositories safety deposit boxes or maintai | | which the committee de | eposits funds, ho | olds accounts, rents |
|--|--|-------------------------|-------------------|---------------------------------|
| Name of Bank, Depository, etc | | | | [ADDITIONAL] |
| | | | | |
| Mailing Address | 1 | | 1 1 1 1 1 | |
| . J | | | | |
| | | | | |
| | | | | |
| | CITY 🛕 | | STATE_ | ZIP CODE 🛕 |
| Name of Any Connected Org | anization, Affiliated Committee, Joint F | undraising Represent | tative, or Lead | [ADDITIONAL ership PAC Sponsor |
| | | | | |
| | | | | |
| Mailing Address | | | | |
| | | | | |
| | | | ا ليا | |
| Relationship: | CITY | | STATE A | ZIP CODE |
| Connected Organization | Affiliated Committee Joint | : Fundraising Represent | tative Le | eadership PAC Sponsor |
| Designated Agent | | | | [ADDITIONAL] |
| | lin Dowling | | 1 1 1 1 | |
| Mailing Address | 1101 Pennsylvania Avenue NW | | | |
| Mailing Address | | | | |
| | Suite 1000 | | | |
| | Washington | | DC | 20004 |
| Title or Position ▼ | CITY A | | STATE▲ | ZIP CODE A |
| Assistan | t Treasurer | Telephone nu | mber | |
| Joint Fundraiser Participant | | | | [ADDITIONAL] |
| | | FEC ID r | number C | |